

<b>IN THE U.S. PATENT AND TRADEMARK OFFICE</b>	
<b>DECLARATION AND POWER OF ATTORNEY</b>	<b>ATT. DOCKET NO. 10554/3</b>

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name,

I believe I am an original, first, and joint inventor of the subject matter that is claimed and for which a patent is sought on the invention entitled **SHAPED-REFLECTOR MULTIBEAM ANTENNAS**, the specification of which was filed on herewith.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

**PRIOR UNITED STATES APPLICATION(S)**

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

APPLICATION NUMBER	FILING DATE (day, month, year)	STATUS (i.e. Patented, Pending, Abandoned)

**PRIOR FOREIGN APPLICATION(S)**

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

APPLICATION NUMBER	FILING DATE (day, month, year)	COUNTRY	PRIORITY CLAIMED
2002951799	01 October 2002	Australia	

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the following attorneys:  
**Richard L. Mayer (Reg. No. 22,490)**

SEND CORRESPONDENCE, AND DIRECT TELEPHONE CALLS TO:

**KENYON & KENYON**  
**One Broadway**  
**New York, NY 10004**  
**(212) 425-7200 (phone)**  
**(212) 425-5288 (facsimile)**  
**Customer No. 26646**

I declare that all statements made herein of my own knowledge are true and all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the United States Code and that such willful statements may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR	FAMILY NAME <b>HAY</b>	FIRST GIVEN NAME <b>Stuart</b>	SECOND GIVEN NAME <b>Gifford</b>
RESIDENCE & CITIZENSHIP	CITY <b>Kogarah Bay, New South Wales</b>	STATE OR FOREIGN COUNTRY <b>Australia</b>	COUNTRY OF CITIZENSHIP <b>Australia</b>
POST OFFICE ADDRESS	POST OFFICE ADDRESS <b>11 Bell Avenue</b>	CITY <b>New South Wales</b>	STATE & ZIP CODE/COUNTRY <b>Australia</b>
Signature		Date	

FULL NAME OF INVENTOR	FAMILY NAME <b>GRANET</b>	FIRST GIVEN NAME <b>Christophe</b>	SECOND GIVEN NAME <b>Jean-Marc</b>
RESIDENCE & CITIZENSHIP	CITY <b>Ryde, New South Wales</b>	STATE OR FOREIGN COUNTRY <b>Australia</b>	COUNTRY OF CITIZENSHIP <b>Australia</b>
POST OFFICE ADDRESS	POST OFFICE ADDRESS <b>12 Badajoz Road</b>	CITY <b>Ryde, New South Wales</b>	STATE & ZIP CODE/COUNTRY <b>Australia</b>
Signature		Date	

FULL NAME OF INVENTOR	FAMILY NAME <b>BIRD</b>	FIRST GIVEN NAME <b>Trevor</b>	SECOND GIVEN NAME <b>Stanley</b>
RESIDENCE & CITIZENSHIP	CITY <b>Eastwood, New South Wales</b>	STATE OR FOREIGN COUNTRY <b>Australia</b>	COUNTRY OF CITIZENSHIP <b>Australia</b>
POST OFFICE ADDRESS	POST OFFICE ADDRESS <b>46 Tarrants Avenue</b>	CITY <b>Eastw od, New South Wales</b>	STATE & ZIP CODE/COUNTRY <b>Australia</b>
Signature		Date	

FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	<b>SPREY</b>	<b>Mark</b>	<b>Andrew</b>
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	<b>Chatswood, New South Wales</b>	<b>Australia</b>	<b>Australia</b>
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	<b>9A The Crescent</b>	<b>Chatswood, New South Wales</b>	<b>Australia</b>
Signature		Date	
FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	<b>BARKER</b>	<b>Stephen</b>	<b>John</b>
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	<b>North Ryde, New South Wales</b>	<b>Australia</b>	<b>Australia</b>
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	<b>53 Bridge Road</b>	<b>North Ryde, New South Wales</b>	<b>Australia</b>
Signature		Date	
FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	<b>FORSYTH</b>	<b>Anthony</b>	<b>Ross</b>
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	<b>Mount Colah, New South Wales</b>	<b>Australia</b>	<b>Australia</b>
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	<b>6 Round Table Close</b>	<b>Mount Colah, New South Wales</b>	<b>Australia</b>
Signature		Date	